PATENT APPLICATION FEE DETERMINATION RECO									Application or Docket Number				
								19/889841				/	
  -	RCE	•		S FILED - PART I (Column 1) (Column 2)				SMALL ENTITY TYPE		O	OTHER THAN OR SMALL ENTITY		
L	TOTAL CLAIM	S			<u> </u>			RATE	FE		RATE		
F	OR		NUMBE	NUMBER FILED		BER EXTRA	7	BASIC F	EE		BASIC FE		
Ţ	OTAL CHARĞI	EABLE CLAIMS	// п	// minus 20=			7	X\$ 25	_		Vara	<del></del>	
١٧	DEPENDENT	CLAIMS	14	1 minus 3 =		<del></del>	1	<del> </del>	<del></del>		<b>—</b>	<del></del>	
М	ULTIPLE DEPE	NDENT CLAIM	PRESENT	RESENT			1	X100:	<u> </u>	OF	X200=	<b></b>	
* If the difference in column 4 in Land 4							J	+180=		OF	+360=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	-	OF	TOTAL	190	
	•	CLAIMS AS	AMENDE					03141				RTHAN	
4		(Column 1)	T	(Colum	EST	(Column 3	3)	SMALL	ADDI		SMALL	ENTITY	
AMENDMENT ,		REMAINING AFTER AMENDMENT	ļ	PREVIO	USLY	PRESENT EXTRA		RATE	TIONA FEE		RATE	ADDI- TIONAL FEE	
	Total	<u> </u>	Minus	**		-		X\$ 25=	İ	OR	X\$50=		
¥	Independent	ENTATION OF M	Minus	PENDENT.	<u> </u>	-	4	X100=		OR	X200=	1	
-	1	ENTATION OF R	OCTIPLE DE	PENDENT	CLAIM		J	+180=		7	+360=	<u> </u>	
						•		TOTAL		OR	TOTAL	<del> </del>	
		(Column 1)		(Columi	1 <i>2</i> )	(Column 3)	٠	ADDIT. FEE	<b></b>	JOR	ADDIT, FEE	L	
0		CLAIMS REMAINING		HIGHE:	31	PRESENT	1		ADDI-	ו ר		ADDI-	
	Total	AFTER AMENDMENT		PREVIOU PAID FO	SLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Independent	*	Minus	**		E		X\$ 25=	ļ.	OR	X\$50=		
1		* NTATION OF MU	Minus	SENDENT O		-		. X100=		OR	X200=		
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								TOTAL ADDIT FEE	·	OR.	TOTAL ODIT, FEE		
Ť	·	(Column 1)		(Column		(Column 3).	·			•			
		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBER PREVIOUS PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
Ŀ	lotal		Minus	44		÷:		X\$ 25=	FEE		V050	FEE	
L	ndependent	*	Minus	***			-			OR	X\$50=		
I	IRST PRESEN	NTATION OF MU	LTIPLE DEP	ENDENT C	AIM			X100=		OR	X200=		
lf t	If the entry in column to be loss than the									OR	+360=		
	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT. FEE		
Th	e "Highesi Numb	er Previously Paid	For (Total or I	SPACE is les	s than is the h	3, enter "3." ghest number		ODIT FEE	opriate box	in colur	nn 1.		
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	11.04.1070						raler	nl and Tradem:	irk Office, U.S	S. DEPAR	ITMENT OF C	OMMERCE	